								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003									10784052				
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN		
T	OTAL CLAIMS	\$	58	,				RATE	FEE	٦	RATE	FEE	
FOR '			NUMBEI	NUMBER FILED		NUMBER EXTRA		BASIC FE	E 385.00	OR		†	
ř	OTAL CHARGE	ABLE CLAIMS	58 minus 20=		· 38			XS 9=	342	OR	7000		
	DEPENDENT (<u> </u>	rinus 3 =	. 4			X43=	AL	OR	Yes	· -	
MULTIPLE DEPENDENT CLAIM PRESENT								+145≒		OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL	899	OR	<u> </u>		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMALL	ENTITY	OR	OTHER		
MENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID F	SER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
202	Total	. 58	Minus			-58		· X\$ 9=	342	OR	X\$18≖		
ABE	Independent • / Minus				=4	ſ	X43=	172	OR	X86=			
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=	1.72		+290=		
								TOTAL	15670	OR	TOTAL		
5	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST						A	ODIT. FEE	K 77	OR	ADDIT. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ST ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	.51	Minus	151		• /		X\$ 9=		OR	X\$18=		
	Independent	. 7/	Minus	7		•/.	ı	X43≈	-	OR	XB6=		
	FIAST PRESE	NTATION OF ML		ŀ	446								
L								+145=		OR	+290= TOTAL		
								DOIT. FEE	ليكها	OR ,	DOTT. FEE		
.]	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST								· ·				
		REMAINING AFTER AMENDMENT		PREVIOL PAID FO	SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE	ı	RATE	ADDI- TIONAL	
	Total	•	Minus	+=			H	X\$ 9=			X\$18=	FEE	
	Independent	•	Minus	***			H			OR			
<u>.</u>	FIRST PRESE	NTATION OF MU)F MULTIPLE DEPENDE		T CLAIM		-	X43=		OR	X86=		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											+290°s	<u> </u>	
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "20." ***Highest Number Previously Paid For IN THIS SPACE is less than 3, enter "3."										OR A	TOTAL DOT, FEE		
7	ps Highest Virus	noer Previously Paid ber Previously Paid	n ror (N TH): For (Total or	s SPACE is i Independent	ess than I) is the I	3, enter 3.° · ighest number			ropriate box				
			•					•		٠.	•		

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